<table>
<thead>
<tr>
<th>SUBJECT:</th>
<th>Sharps Waste</th>
<th>Number:</th>
<th>EHS-006</th>
</tr>
</thead>
<tbody>
<tr>
<td>CATEGORY:</td>
<td>Medical Waste Management</td>
<td>Last Update:</td>
<td>10-24-2018</td>
</tr>
<tr>
<td>ISSUING OFFICE</td>
<td>Environmental Health &amp; Safety (EHS) Office</td>
<td>Revision Date:</td>
<td>05-31-2019</td>
</tr>
</tbody>
</table>

Guidelines for Managing Sharps Waste

DESCRIPTION

“Sharps waste” means any device having acute rigid corners, edges or protuberances capable of cutting or piercing (i.e. hypodermic needles, hypodermic needles with syringes, blades, needles with attached tubing, acupuncture needles, root canal files, broken glass items used in health care such as Pasteur pipettes and blood vials contaminated with biohazardous waste, and any item capable of cutting or piercing from trauma scene waste).

Under no circumstances should “sharps waste” be disposed in the normal trash. Sharps waste must be disposed of through the EHS Office only.

LEGAL BASIS

This guideline has been established and maintained within the District for all employees to comply with requirements set forth in Sections 117600-118360 of the California Health and Safety Code known and cited as the Medical Waste Management Act, revised January 2017, and Section 173.6 of Title 49 of the Code of Federal Regulations, known and cited as Materials of Trade Exceptions, and Section 68.1201-1211 of San Diego County Ordinance 9967.

CONTAINMENT & STORAGE

Sharps waste shall be segregated from other wastes. To containerize or store sharps waste, at the point of generation and while collected in that room, follow these instructions:

- Place sharps waste immediately after use into a red, rigid puncture-resistant container, which meets the standards of United States Food and Drug Administration (FDA) as a medical device like the one in Figure 1, used for the collection of discarded medical needles or other sharps. These FDA-cleared sharps waste containers are provided by the EHS Office.

![Figure 1](https://www.sandi.net/staff/safety-management)
• Affix the label (see Attachment A, Page 4) on the sharps waste container, as described below:
  ➢ Words “SHARPS WASTE” or with the international biohazard symbol and the word “BIOHAZARD”.
  ➢ School Name, Address, and Phone Number
• Secure the lid attached to the sharps waste container.
• Secure sharps waste container from access by unauthorized individuals (i.e. locked cupboard/cabinet)
• Store no longer than 30 days when the sharps waste container is ready for disposal.

DESIGNATED ACCUMULATION AREA
• Keep container in a secured room to deny access by unauthorized persons and posted with warning signs, on or adjacent to, the exterior of entry doors, gates, or lids.
• The wording of warning signs shall be in (see Attachment B, Page 5):
  ➢ English: “CAUTION-BIOHAZARDOUS WASTE STORAGE AREA-UNAUTHORIZED PERSONS KEEP OUT,” and Spanish, “CUIDADO-ZONA DE RESIDUOS-BIOLOGICOS PRELIGROSOS-PROHIBIDA LA ENTRADA A PERSONAS NO AUTORIZADAS,” or
  ➢ Another language, in addition to English, determined to be appropriate by the infection control staff or enforcement agency.

DISPOSAL
• When sharps waste container is about three-quarters (¾) full, or annually, submit Sharps Waste Removal Request Form (see Attachment C, Page 6) to EHS Office for removal processing.
• When a removal request is received, the EHS Office prepares a tracking document (see Attachment D, Page 7).
• The Safety Compliance Technician delivers an empty sharps waste container as replacement, picks up and transports sharps waste to a designated consolidation facility (Warehouse and Distribution Center) for subsequent disposal and treatment. The Safety Compliance Technician shall have the tracking document, signed by both site staff and transporter, in his/her possession while transporting the sharps waste and shall be shown upon demand to any enforcement agency personnel or officer of the Department of the California Highway Patrol. The facility receiving the sharps waste shall sign the tracking document and left with a copy.
RECORDKEEPING

- EHS Office will send the site a copy of the completed sharps waste tracking document. The site shall maintain records for not less than three (3) years. EHS Office shall have available electronically records.

ATTACHMENTS

- A-Sharps Waste Label
- B-International Biohazard Symbol
- C-Sharps Waste Removal Request Form
- D-Sharps Waste Tracking Document

If you have questions or comments about these guidelines, please contact Environmental Health & Safety (EHS) Office

(858) 627-7174

San Diego Unified School District reserves the right to make exceptions to, modify or eliminate this guideline and or its content. This document supersedes all previous guidelines relative to this subject.
Place this label on the sharps waste container

SAN DIEGO UNIFIED SCHOOL DISTRICT

SHARPS WASTE

BIOHAZARD

SITE NAME: ________________________________
ADDRESS: ________________________________

PHONE NUMBER: ____________________________

IN CASE OF EMERGENCY, CONTACT THE ENVIRONMENTAL HEALTH & SAFETY OFFICE AT (858) 627-7174

HANDLE WITH CARE
Place this warning sign on the exterior door of designated accumulation area

CAUTION
BIOHAZARDOUS WASTE STORAGE AREA
UNAUTHORIZED PERSONS KEEP OUT

CUIDADO
ZONA DE RESIDUOS BIOLOGICOS PELIGROSOS
PROHIBIDA LA ENTRADA A PERSONAS NO UTORIZADAS
**SHARPS WASTE REMOVAL REQUEST FORM**

**SHARPS WASTE REMOVAL REQUEST INSTRUCTIONS**

When your sharps waste containers are ¾ full or annually, contact the EHS Office via one of the following:

1. Email: safetyoffice@sandi.net
2. Telephone: (858) 627-7174
3. Fax: (858) 573-5710

Please provide the following information when requesting a sharps waste removal:

- School name, site address and phone number
- Your name and days you are at the site
- Number of full sharps waste containers for pick-up

**SHARPS WASTE REMOVAL PROCESS**

1. Properly label the full sharps waste container.
2. Once your removal request was received by the EHS Office, a tracking document will be prepared and given to the Safety Compliance Technician.
3. An empty sharps waste container will be delivered to your site as a replacement.
4. Place full sharps waste container inside the shipping container and secure the lid.
5. Sign the tracking document. The full sharps waste container will be transported to a designated consolidation facility (Warehouse & Distribution Center) for subsequent disposal and treatment.
6. A copy of a completed tracking document will be provided to the site for record-keeping*.

*NOTE: The nurse should keep a copy of the tracking document for a period of 3 years and available for review. For sites under a Unified Program Facility Permit, another copy will be forwarded to the designated Chemical Hygiene Office (CHO).

---

**THIS SECTION MUST BE FILLED OUT BY THE GENERATING SITE**

<table>
<thead>
<tr>
<th>School Site/ Generator</th>
<th>Contact Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Site Contact/Staff List:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>No. of Full Sharps Waste Container:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

**UNACCEPTABLE ITEMS:**

- Pharmaceutical Waste
- Universal Waste (mercury)
**SHARPS WASTE TRACKING DOCUMENT**

School Site / Generator: ___________________________ Date: __________________

Generator Site Address: ____________________________

Site Contact / Staff List: ___________________________ Email address: ______________

Contact Phone: ____________________________

Cell (optional): ____________________________

Emergency Response Telephone Number: (619) 441-1818

LQHE Permit Number: 114087

Consolidation / Receiving Facility Site Address: 2351 Cardinal Lane, San Diego, CA 92123

Days at site (circle) M T W T F Hours _________ to __________

<table>
<thead>
<tr>
<th>Number of Containers</th>
<th>Type of Medical Waste</th>
<th>Total Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sharps</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Generator’s Certification:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. This site generates less than 20 pounds of medical waste per week and compliant with all the requirements of California Health & Safety Code Section 118030.

Site Staff Printed / Typed Name | Signature | Date

Transporter Printed / Typed Name | Signature | Date

Receiving Facility Printed / Typed Name | Signature | Date